# Tuolumne County Emergency Medical Services Agency

**Title: ALS Skills Competency Verification** 

Medical Director Signature: on file

Creation Date: 11-8-2017

Revision Date: 5-25-22

EMS Coordinator Signature: on file Review Date: 5/2026

## I) Purpose

The purpose of this policy is to specify the requirement ALS providers shall adhere to in demonstrating competency for infrequently used skills by ALS providers.

### II) Authority

Health and Safety Code, Division 2.5, Section 1797.220 & 1798 et seg.

#### III) Definitions

- A) "Infrequently Used Skills" means ALS procedures that have been identified through the QA/QI process as a skill performed on an infrequent basis within the Tuolumne County EMS system which requires on-going training to maintain competency.
- B) "ALS Personnel" means EMT-Ps and Flight Nurses accredited by the Tuolumne County EMS Agency.

#### IV) Policy

- A) Demonstration of competency of infrequently utilized skills is to be performed in a training environment using mannequins or other approved training adjuncts.
- B) Providers are required to develop a process that affords all ALS personnel the opportunity to demonstrate competency at the required intervals.
- C) Providers and ALS personnel shall follow the process specified in EMS Agency Policy when verifying an infrequently used skill.
- D) Providers shall track individual employees training records using a spreadsheet or other EMS Agency approved format.
- E) Providers shall develop and provide the EMS Agency with a Training Schedule by January 1 each year for that calendar year.
- F) Providers shall notify the EMS Agency of any ALS Personnel who fails to complete the requirement of this Policy within 15 days of the completion of each semi-annual training sessions.
- G) ALS Personnel failing to complete the requirement of this Policy shall have their Accreditation suspended until the requirements have been completed.
  - The EMS Medical Director may allow the continued Accreditation of the aforementioned ALS Personnel, for a period not to exceed 15 days, in extraordinary circumstances.
- H) Providers shall ensure sufficient training equipment and supplies are available to implement this Policy.
- I) Providers shall make records available to the EMS Agency, upon request, to demonstrate compliance with this Policy.
- J) Competency of the following infrequently used skills are to document semi- annually:
  - 1) Adult Endotracheal Intubation
  - 2) Supraglottic and Periglottic Airways
  - 3) Needle Cricothyrotomy

EMS Policy No. **254.10** 

- 4) Needle Thoracostomy
- 5) PICC, Tunneled and Non-Tunneled Venous Access
- K) Competency of the following infrequently used skills are to be documented annually:
  - 1) Nasogastric Tube Insertion
  - 2) Transcutaneous Cardiac Pacing
  - 3) Intraosseous Infusions
  - 4) Continuous Positive Airway Pressure
  - 5) 12 Lead ECG Acquisition
  - 6) Childbirth
- L) The EMS Medical Director may change the frequency of the training intervals of any skill based on his/her medical judgment.
- M) Any procedure that is found to be in need of improvement through the QA/QI process may be added at the discretion of the EMS Medical Director.
- N) Any procedure that is added to the local Scope of Practice may be added at the discretion of the EMS Medical Director.